

PURPOSE

To permit individuals receiving benefits from one or more of the Michigan Department of Health and Human Services' (MDHHS) health programs to request amendments to their protected health information.

POLICY**Mental Health
Treatment Records****Inserting Information in the Treatment Records by Recipients,
Guardians, or Parents of a Minor Recipient**

State hospitals and centers are legally obligated to allow recipients, their guardians, or parents of a minor, after having gained access to the treatment records, to appropriately enter challenges to the accuracy, completeness, timeliness, or relevance of factual information in the recipient's record. These persons will be given the opportunity to correct or amend the information at issue. These corrections/amendments shall become part of the recipient's treatment record.

**Non-Mental Health
Records**

Individuals (or their legally authorized representatives) may request to amend Protected Health Information (PHI) or a record about the individual in a designated record set for as long as the PHI is maintained in the designated record set.

MDHHS may deny an individual's request for amendment, if the protected health information or record that is the subject of the request:

- Was not created by MDHHS, unless the individual provides a reasonable basis to believe that the originator of protected health information is no longer available to act on the requested amendment.
- Is not part of the designated record set.
- Is not available for inspection by the individual pursuant to individual access policy.
- Is accurate and complete.

Individuals requesting an amendment to their protected health information must provide a reason to support a requested amendment.

**When other applicable privacy or confidentiality laws conflict with HIPAA, comply with the law that provides the individual with greater privacy protection or rights. (Examples of state and federal laws are: Medicaid, Substance Abuse, Public Health Code, HIV/AIDS/STDs, and Mental Health Code). When in doubt, contact the Bureau of Legal Affairs.*

REFERENCES

45 CFR §164.524, §164.526, §164.530, Form DCH 1229, MCL 330.1749.

CONTACT

For additional information concerning this policy, contact the MDHHS Bureau of Legal Affairs.